

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> NO ON PROP 21: CALIFORNIANS FOR RESPONSIBLE HOUSING, A COALITION OF SENIORS, VETERANS, AFFORDABLE HOUSING ADVOCATES, LABOR & SOCIAL JUSTICE <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>AREA CODE/PHONE NUMBER</b>                      (415)389-6800                 </div> <div style="width: 45%;"> <b>I.D. NUMBER</b> (if applicable)                      1421884                 </div> </div> <hr/> <b>STREET ADDRESS</b>  <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <b>CITY</b>                      SAN RAFAEL                 </div> <div style="width: 20%;"> <b>STATE</b>                      CA                 </div> <div style="width: 30%;"> <b>ZIP CODE</b>                      94901                 </div> </div>			<b>Date of This Filing</b> <u>09/01/2020</u>  <b>Report No.</b> <u>LCR # 1818</u>  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>  <b>No. of Pages</b> <u>6</u>	<b>Date Stamp</b>   Page 1 of 6	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">                         CALIFORNIA FORM 497                     </div> For Official Use Only
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## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
08/31/2020	470 WARREN LP AND AFFILIATED ENTITIES San Francisco, CA 94118  Memo Reference: INC:S497:1593	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
08/31/2020	470 WARREN LP AND AFFILIATED ENTITIES San Francisco, CA 94118  Memo Reference: INC:S497:1594	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
08/31/2020	470 WARREN LP AND AFFILIATED ENTITIES San Francisco, CA 94118  Memo Reference: INC:S497:1595	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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08/31/2020	ROBERT CORMACK Palo Alto, CA 94306	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	\$3,600.00
08/31/2020	DAVLYN INVESTMENTS San Diego, CA 92130	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
08/31/2020	SARA FLYNN San Francisco, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE INVESTMENT FLYNN INVESTMENTS	\$15,000.00

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AREA CODE/PHONE NUMBER (415)389-6800	I.D. NUMBER (if applicable) 1421884		<b>Report No.</b> LCR # 1818		
STREET ADDRESS  CITY SAN RAFAEL STATE CA ZIP CODE 94901			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
			<b>No. of Pages</b> 6		

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08/31/2020	JOHN KAUFMANN Tiburon, CA 94920	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	\$1,000.00
08/31/2020	LEEDS PROPERTY MANAGEMENT AND AFFILIATED ENTITIES, INCLUDING BENJAMIN LEEDS Los Angeles, CA 90034  Memo Reference: INC:S497:1525	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
08/31/2020	MICHAEL RICHARDSON San Francisco, CA 94108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00

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08/31/2020	LAWRENCE SHANE Woodside, CA 94062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	\$1,000.00
08/31/2020	TURNING POINT REALTY INVESTMENTS LLC(RESPONSIBLE OFFICER: AARON REUTER) Larkspur, CA 94939	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00
08/31/2020	ISOLDE WILSON Belvedere, CA 94920	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER SELF-EMPLOYED; ISOLDE WILSON	\$1,000.00

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STREET ADDRESS			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY SAN RAFAEL	STATE CA	ZIP CODE 94901	<b>No. of Pages</b> 6		

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

Memo Reference: INC:S497:1525  
MADE BY BENJAMIN LEEDS

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Memo Reference: INC:S497:1595  
REC'D THRU AFFILIATED ENTITY: 470 WARREN, LP (SAME ADDRESS)

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Memo Reference: INC:S497:1594  
REC'D THRU AFFILIATED ENTITY: 725 MONTEREY, LLC (SAME ADDRESS) (RESPONSIBLE OFFICER: JOSEPH SUTTON)

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Memo Reference: INC:S497:1593  
REC'D THRU AFFILIATED ENTITY: 445 WARREN, LLC (SAME ADDRESS) (RESPONSIBLE OFFICER: JOSEPH SUTTON)

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